Exhibit 8

PATIENT NAME:		DATE OF INJURY:
Diagnosis:		
accident. As a result (with an "X".	or treated the above name patient for injury of the injuries, I have disabled the person from that the patient is disabled from work / o	om those activities that are marked
The patient is from the date of accide	while to return to employment at fais time, I ant until The restrictions include	out is restricted from regular work duties
: : -	Listing objects that weigh more than	pounds.
••	Excessive bonding:	
:	Excessive twisting:	
: 	Prolonged standing:	
:	Other:	
standing as required by	As some housework may involve bending vacuuming, making beds, washing floors, sjeets on the floor, carrying garbigs or gro	sinks, bathtubs, and toilets, moving
CARING FOR ? twisting, and prolonged objects.	FHE PATIENT'S PERSONAL REEDS: I standing as required by bathing the patien	Which may involve bending, lifting, at, dressing the patient, and lifting
prolonged standing as a	THE PATIENT'S CHILDREN: Which required by changing children's clothes, bachildren, feeding the children, cleaning and	thing children, cooking for the
PREVENC:		DATE: 9/14/09
signature of ph		DATE: 17/4/09

* 11/22/2000 13:11 FAX 12483541114

FAX

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N I Marria TWO BY Let Com		. DA	TE OF INJURY:	4/16/09
PATIENT NAME:			••••	
DIAGNOSIS:		sol Spear	•	
I have examined and/or t accident. As a result of t	reated the above name pa he injuries. I have disable	or are hereour rose	,	, , ,
	hat the patient is disabled			
The patient is abl	e to return to employmen	t at this time, but i	s restricted from reg	ular work duties
from the date of accident				
	Lifting objects that weig	h more than	pounda:	• • • •
1	Excessive bending:			
-			•	
<u></u>	Excessive twisting:	:		,
	Prolonged standing:			
	Other:	•		
HOUSEWORK: A standing as required by ve furniture, picking up object	s some housework may it cutming, making beds, w is on the floor, carrying g	BRUILE WOOLS, same	40) naminan) sina sina	rolonged ets, moving
CARING FOR THO twisting, and proponged attopicts.	The same of the sa	ran Kronovinsi Wh	ich may involve ber	ading, lifting, ad lifting
CARING FOR THI prolonged standing as requ children, watching the chil	E PATIENT'S CHILDR tired by changing children dren, feeding the children			
DRIVING: SIGNATURE OF PHYSI	ICIAN MASS	feel)	ATE:	6/25/09
PHYSICIAN'S NÂME:	10	le Ino	<u> </u>	
· · · · · · · · · · · · · · · · · · ·	Monte of the	J		•

Disability Certificate

Patient Name:			Date Of Injury://
Diagnosis	wed W	- CON	Lla
aforementioned activities marked	accident. As result of the limits with a check mark.	injuries, I hav	tient for injuries sustained in the de disabled this patient from those work/ other from the disabled to _/_/_
The patient regular work	is able to return to his/he duties from the date of the	r employment ne accident un	at this time with restrictions from til/, The restrictions include:
	Lifting objects t	hat weigh mor	e than pounds.
	Excessive bendi	ng	
	Excessive twisti	ng	
	Prolonged stand	ing	
	Other:	_	
Attending Camovement to moving about bed or in a what taking medica Caring for patias required by watching the camoving t	g furniture, picking up of are: bathing, toileting (Bla and from the bathroom) to at indoors and outdoors, no accident, eating, and preparations or other remedies the ent's children; which may	dider and bow ransferring from noving, turning varing meals, of that are ordinary involve bend ies, bathing ch	ling, lifting, and prolonged standing nildren, cooking for the children,
Driving			

PATIENT NAME	DATE OF INJURY:
DIAGNOSIS:	
with an "X".	above name patient for injury sustained in the aforementioned s, I have disabled the person from those activities that are marked
It is my opinion that the pa	tient is disabled from work / other from 19/16/29 to 11/1/09
From the date of accident until	to employment at this time, but is restricted from regular work duties. The restrictions include:
Lifting of	bjects that weigh more than pounds.
Excessive	e bending:
Excessive	twisting:
Prolonged	i standing:
Other:	
HOUSEWORK: As some housthading as required by vaccuuming, a furniture, picking up objects on the fi	usework may involve bending, lifting, twisting, and prolonged making beds, washing floors, sinks, bathtubs, and toilets, moving loor, carrying garbage or groceries.
CARING FOR THE PATIEN twisting, and prolonged standing as replaces.	IT'S PERSONAL NEEDS: Which may involve bending, lifting, equired by bathing the patient, dressing the patient, and lifting
roronged standing as required by che	IT'S CHILDREN: Which may involve bending, lifting and anging children's clathes, bathing children, cooking for the ng the children, cleaning and straightening up after the children.
D'RIVING:	
IGNATURE OF PHYSICIAN:	DATE: MATE: MAN A
HYSICIAN'S NAME:	For

07/08/2001 12:13 FAX 12483541114

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PATENT NAME:	DATE OF INJURY:
DIA GNOSIS:	and in the afarement and
accident was a teamle of the fu	d the above name patient for injury sustained in the aforementioned the above name patient for injury sustained in the aforementioned the person from those activities that are marked quiries, I have disabled the person from those activities that are marked
It is my opinion that t	he patient is disabled from work / other from 21109 to 1/14/10
The patient is able to from the date of accident until	return to employment at this time, but is resulted from regular work tions. The restrictions include.
Lift	ing objects that weigh more than pounds
	essive bending
Exc	essive twisting.
Pro!	onged standing
Oth	tit'
furnities, picking up objects or	ne housework may involve bending, lifting, twisting, and prolonged ning, making beds, washing floors, sinks, bathubs, and toilets, moving the floor, carrying garbage or groceries
objects	TIENT'S PERSONAL NEEDS. Which may involve bending, lifting, or as required by bathing the patient, dressing the patient, and lifting
CARING FOR THE PArticular to watching the children	TIENT'S CHILDREN Which may involve bending, biling and by changing children's cluthes, bathing children, cooking for the production, cleaning and straightening up after the children, feeding the children.
DRIVING	DATE 12/11/09
SIGNATURE OF PHYSICIA	W
PHYSICIAN'S NAME	DR. Islander

PATIENT NAME:		DATE OF INJURY: 12.29.07
DIACNOSIS:	arical + lembon Ro	dienly
	Van waated the shows name nationt for	injury sustained in the aforementioned rson from those activities that are marked
with an "X".		fork / other from $9-3.07$ to $10-3.08$
The patient from the date of acc	is able to return to employment at this ident until The restrictions i	time, but is restricted from regular work duties nelude:
	Lifting objects that weigh more	than pounds.
	Excessive bending:	
	Excessive twisting:	
	Prolonged standing:	
	Other:	
standing as required	K: As some housework may involve by vacuuming, making beds, washing objects on the floor, carrying garbage	bending, lifting, twisting, and prolonged floors, sinks, bathtubs, and toilets, moving or groceries.
CARING FOI twisting, and prolon objects.	R THE PATIENT'S PERSONAL Niged standing as required by bathing th	EEDS: Which may involve bending, lifting, e patient, dressing the patient, and lifting
	o manised by changing children's Cloi	Which may involve bending, lifting and thes, bathing children, cooking for the ting and straightening up after the children.
p driving:	0 :	
SIGNATURE OF I	PHYSICIAN: Caba	DATE: 9- 3.08
PHYSICIAN'S NA	ME: R GINABACA	7~

PATIENT NAME:		OF INJURY: 4/6/11
DIAGNOSIS: U	imbar, strain & Do	25m
accident. As a result of with an "X".	treated the above name patient for injury sustain the injuries, I have disabled the person from tho that the patient is disabled from work / other from	se activities that are merked
The patient is at	ble'to return to employment at this time, but is re at until The restrictions include:	stricted from regular work duties
_	Lifting objects that weigh more than p	oounds.
·	_ Excessive bending:	
•	Excessive twisting:	1
<u>. </u>	Prolonged standing:	1
	Other:	
standing as required by v	As some housework may involve bending, lifting acuuming, making beds, washing floors, sinks, betts on the floor, carrying garbage or groceries.	
	IE PATIENT'S PERSONAL NEEDS: Which tanding as required by bathing the patient, dressi	
prolonged standing as req	E PATIENT'S CHILDREN: Which may involuited by changing children's clothes, bathing children, fleeding the children, cleaning and straigh	ildren, cooking for the
A DRIVING:	•	
SIGNATURE OF PHYS	ICLAN: 5.9 Holan	EATE: 4/19/11
PHYSICIAN'S NAME:	W. Hoban	(

MAY CHRISTOPHER TRAINOR

09/23/2011/FRI 08:24AM

EECEIAE: MO'3830

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Patient namí	DATE OF INJURY: 3811
DIAGNOSIS: Whip Wish Neek.	LW BAR Pa
I have examined and/or treated the above name patient for injuraccident. As a result of the injuries, I have disabled the person twith an "X".	y sustained in the aforementioned from those activities that are marked
It is my opinion that the patient is disabled from work /	
The patient is able to return to employment at this time, from the date of accident until The restrictions include	but is restricted from regular work duties
Lifting objects that weigh more than	pounds.
Excessive bending:	
Excessive twisting:	
Prolonged standing:	
L'Other:	
HOUSEWORK: As some housework may involve bending standing as required by vacuuming, making beds, washing floors, furniture, picking up objects on the floor, carrying garbage or group the floor.	sinks, bathfubs, and toilets, moving ceries.
CARING FOR THE PATIENT'S PERSONAL NEEDS: twisting, and prolonged standing as required by bathing the patien objects.	Which may involve bending, listing, t, dressing the patient, and listing
CARING FOR THE PATIENT'S CHILDREN: Which m prolonged standing as required by changing children's clothes, bat children, watching the children, feeding the children, cleaning and	ay involve bending, lifting and hing children, cooking for the straightening up after the children
E DRIVING:	o y and all online M.
SIGNATURE OF PHYSICIAN:	DATE: 5/3/11
PHYSICIAN'S NAME: DY. HODAL	

5800

	E OF INJURY: 4611
DIAGNOSIS: CERVICAL, Thorus	Limbio Steam
I have examined and/or treated the above name patient for injury susta accident. As a result of the injuries, I have disabled the person from the with an "X"	tined in the aforementioned nose activities that are marked
It is my opinion that the patient is disabled from work / other f	from 5/19/11 to 6/19//
The patient is able to return to employment at this time, but is from the date of accident until The restrictions include:	restricted from regular work duties
Lifting objects that weigh more than	pounds.
Excessive bending:	
Excessive twisting:	
Prolonged standing:	
Other:	
HOUSEWORK: As some housework may involve bending, liftir standing as required by vacuuming, making beds, washing floors, sinks, furniture, picking up objects on the floor, carrying garbage or groceries.	ng, twisting, and prolonged bathtubs, and toilets, moving
CARING FOR THE PATIENT'S PERSONAL NEEDS: Which twisting, and prolonged standing as required by bathing the patient, dress objects.	n may involve bending, lifting, sing the patient, and lifting
CARING FOR THE PATIENT'S CHILDREN: Which may inversely prolonged standing as required by changing children's clothes, bathing children, watching the children, feeding the children, cleaning and straight	hildren cooking for the
DRIVING:	y passa ma annatan
SIGNATURE OF PHYSICIAN:	
PHYSICIAN'S NAME: Dr. Ottiroga	

22-K360-118

PATIENT NAME: DATE OF INJURY: 5/18/09
DIAGNOSIS: Lunburgo
I have examined and/or treated the above name patient for injury sustained in the aforementioned accident. As a result of the injuries, I have disabled the person from those activities that are marked with an "X".
It is my opinion that the patient is disabled from work / other from 10/1/04 to 155.
The patient is able to return to employment at this time, but is restricted from regular work duties from the date of accident until 100. The restrictions include:
Lifting objects that weigh more than 15 pounds.
Excessive bending:
Excessive twisting:
Prolonged standing:
Other:
HOUSEWORK: As some housework may involve bending, lifting, twisting, and prolonged standing as required by vacuuming, making beds, washing floors, sinks, bathtubs, and toilets, moving flurniture, picking up objects on the floor, carrying garbage or groceries.
CARING FOR THE PATIENT'S PERSONAL NEEDS: Which may involve bending, lifting, twisting, and prolonged standing as required by bathing the patient, dressing the patient, and lifting objects.
CARING FOR THE PATIENT'S CHILDREN: Which may involve bending, lifting and prolonged standing as required by changing children's clothes, bathing children, cooking for the children, watching the children, feeding the children, cleaning and straightening up after the children.
DRIVING:
SIGNATURE OF PHYSICIAN: DATE:
PHYSICIAN'S NAME:

PATIENT NAME:		DATE OF INJURY:	4.23.10
DIAGNOSIS:	envicel, Thore	acic, Lumbar	
I have examined and/or t	reated the above name patier	nt for injury sustained in the aforem he person from those activities that	nentioned are marked
It is my opinion	that the patient is disabled fro	om work / other from <u>5-20-10</u>	10 6/20/12
The patient is ab	le to return to employment at until The restricti	this time, but is restricted from re- ons include:	gular work duties
	_ Lifting objects that weigh r	more than pounds.	
	Excessive bending:		
	Excessive twisting:		
	Prolonged standing:		
<u> </u>	Other:		
standing as required by vi	As some housework may invo acuuming, making beds, was acts on the floor, carrying gar	olve bending, lifting, twisting, and hing floors, sinks, bathtubs, and to bage or groceries.	prolonged ilets, moving
CARING FOR TH twisting, and prolonged si objects.	(E PATIENT'S PERSONA tanding as required by bathin	L NEEDS: Which may involve being the patient,	anding, lifting, and lifting
prolonged standing as req	mired by changing children's	N: Which may involve bending, tile clothes, bathing children, cooking cleaning and straightening up after	for the
DRIVING:			·
SIGNATURE OF PHYS	SICIAN:	DATE	: <u>5·20·10</u>
ÝHYSICIAN'S NAME:	_ Dr. Quingo	<u> </u>	

		DAT	E OF INJURY: _	3/108
PATIENT NAME:		DAT	E OF MOOKET	5-2211
DIAGNOSIS:	Exercal Papie	eucopatus,	CUMBAR	. STEALS
I have examined and accident. As a result with an "X".	Vor treated the above name p t of the injuries, I have disab	patient for injury susta pled the person from th	ined in the aforement lose activities that a	.•
-	tion that the patient is disabl			
The patient from the date of acci	is able to return to employm dent until The res	ent at this time, but is strictions include:	restricted from regu	ılar work duties
	Lifting objects that we	eigh more than	_pounds.	
	Excessive bending:			
	Excessive twisting:			
	Prolonged standing:			
	Other:			
di on required	K: As some housework ma by vacuuming, making beds objects on the floor, carrying	s, washing floors, sink:	s, paliituos, and ton	rolonged cts, moving
CARING FOI twisting, and prolong objects.	R THE PATIENT'S PERS	ONAL NEEDS: White bathing the patient, dro	ich may involve ber essing the patient, an	nding, lifting, nd lifting
	THE PATIENT'S CHIL s required by changing chile te children, feeding the chile	dren's clothes hairing	Children, Cooking 1	or uic
DRIVING:				
SIGNATURE OF P	HYSICIAN:		DATE:	4/23/08
PHYSICIAN'S NA	The Cul	(abacai)		